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Apr 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mourning
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 741581 (3)
1. Corporation Name
PENIEL CHRISTIAN CHURCH, INC.



Principal Place of Business Mailing Address
P.O. BOX 540293 ORLANDO FL 32854 P.O. BOX 540293 ORLANDO FL 32854-0293

3. Date Incorporated or Qualified 02/09/1978 3a. Date of Last Report 04/02/1996
4. FEI Number 59-1829959 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 5301 Goddard Ave Suite, Apt. #, etc. 26 P O Box 608427 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Orlando, fl 28 Orlando, Fl
24 32810-5437 25 orange 29 32860-8427 30 Orange

9. Name and Address of Current Registered Agent
DIRECTOR RAMOS, RAFAEL 1000 MELLER WAY ORLANDO FL 32825

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RAMOS, RAFAEL	
STREET ADDRESS	1000 MELLER WAY	
CITY-ST-ZIP	ORLANDO FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	RIVERA, MARIBEL	
STREET ADDRESS	147 BEXLEY BOULEVARD	
CITY-ST-ZIP	OCOE FL 34761	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, ELIU	
STREET ADDRESS	1100 SUNCREST DRIVE	
CITY-ST-ZIP	APOPKA FL 32703	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HARTLINE, PAUL	
STREET ADDRESS	2338 WOODLEAF COURT	
CITY-ST-ZIP	ORLANDO FL 32837	
TITLE	VPT	<input checked="" type="checkbox"/> DELETE
NAME	TELLADO, MILTHA	
STREET ADDRESS	510 ORANGE DRIVE	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32701	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	VPT INEZ SIERRA
5.3 STREET ADDRESS	9319 Larette Dr
5.4 CITY-ST-ZIP	Orlando, FL 32817-2623
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Rafael Ramos* 3-24-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0017975

CR2E037 (9/96)